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| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2008</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>  |  | Docket Number (Optional)<br>TOW-034RCE2   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
|--|--|---|-----------|------------|-------------------------|--|--|-------|------|----------|--|-------|-------|-----------|---|--------|-------|----------|--|--------|-------|----------|--|--------|--------|----------|
| Application Number   | 10/626,225-Conf. #4543                 | Filed July 24, 2003                       |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| For FUEL CELL STACK FOR VEHICLE  |  |   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| Art Unit 1795  | Examiner                               | J. J. Rhee                                |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.   |  |   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  |  |   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <table> <thead> <tr> <th></th> <th><u>Fee</u></th> <th><u>Small Entity Fee</u></th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$120</td> <td>\$60</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$460</td> <td>\$230</td> <td>\$ 460.00</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$1050</td> <td>\$525</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1640</td> <td>\$820</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2230</td> <td>\$1115</td> <td>\$ _____</td> </tr> </tbody> </table> |  |   |           | <u>Fee</u> | <u>Small Entity Fee</u> |  | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ _____ | <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | \$ 460.00 | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1640 | \$820 | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | \$ _____ |
|  | <u>Fee</u>                             | <u>Small Entity Fee</u>                   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$120                                  | \$60                                      | \$ _____  |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$460                                  | \$230                                     | \$ 460.00 |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$1050                                 | \$525                                     | \$ _____  |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$1640                                 | \$820                                     | \$ _____  |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$2230                                 | \$1115                                    | \$ _____  |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>12-0080</u>. I have enclosed a duplicate copy of this sheet.</p>   |  |   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p>   |  |   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>38,220</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br/>Registration number if acting under 37 CFR 1.34 _____</p>  |  |   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <u>/Anthony A. Laurentano/</u><br>Signature  |  | <u>July 18, 2008</u><br>Date              |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <u>Anthony A. Laurentano</u><br>Typed or printed name  |  | <u>(617) 994-0753</u><br>Telephone Number |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  |  |   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |
| <input type="checkbox"/>   | Total of <u>1</u> forms are submitted. |   |           |            |                         |  |  |       |      |          |  |       |       |           |   |        |       |          |  |        |       |          |  |        |        |          |

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: July 18, 2008

Electronic Signature for Anthony A. Laurentano: /Anthony A. Laurentano/